

## CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

**CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT**

Name (print) VALERIE WEBER ASSEMBLY District (if applicable) 5

Office (if applicable) 1001 HARPOON CIRCLE Telephone No. 702.338.8452

Mailing Address (include city and zip code) LV NV 89117

E-Mail Address VWEBER@asm.state.nv.us

Select Appropriate Box(es):

☐ CANDIDATE ☐ PAC ☐ BAG ☐ POL PRY ☐ IND EXP ☐ NONPROFIT CORP

☐ AMENDED ☒ ANNUAL FILING ☐ PETITIONERS WHO INITIATE/CIRCULATE PETITION & RECEIVE OR EXPEND FUNDS IN EXCESS OF 10K

- ☒ Annual Filing - Due January 15, 2006  
Period: January 1, 2005 - December 31, 2005
- ☐ Report #1 - Due August 8, 2006\*  
Period: Jan. 1, 2006 - Aug 3, 2006
- ☐ Report #2 Due - October 31, 2006\*  
Period: Aug. 4, 2006 - Oct. 26, 2006
- ☐ Report #3 Due - January 15, 2007\*\*  
Period: Oct. 27, 2006 - Dec. 31, 2006
- ☐ Annual Filing - Due January 15, 2007  
Period: January 1, 2006 - December 31, 2006

FOR OFFICE USE ONLY

\* Those Reports are filed by incumbents/candidates running for office in the 2006 election cycle  
\*\* Third Report suffices for 2007 Annual Filing if candidate also filed Report Nos. 1 and 2

## CONTRIBUTIONS SUMMARY

1. Total Monetary Contributions Received in Excess of \$100  
(See page 1 of instruction sheet)
2. Total Monetary Contributions Received of \$100 or Less  
(See page 2 of instruction sheet)
3. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)
4. Total Monetary Contributions in the form of loans that were forgiven  
(See page 2 of instruction sheet)

This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
20,938.40	20,938.40
0	0
0	0
0	0

5. Total Amount of Monetary Contributions Received  
(Add Lines 1 through 4) (See page 2 of instruction sheet)
6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind))  
(See page 2 of instruction sheet)
7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)

This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
20,938.40	20,938.40
0	0
0	0

## EXPENSES SUMMARY

8. Total Monetary Expenses Paid in Excess of \$100  
(See page 2 of instruction sheet)
9. Total Monetary Expenses Paid of \$100 or Less  
(See page 2 of instruction sheet)
10. Total Amount of All Monetary Expenses Paid  
(Add Lines 8 and 9) (See page 2 of instruction sheet)
11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)
12. Disposition of Unspent Contributions  
(Only reported on Report #3, Annual Report or 15<sup>th</sup> day of the second month after candidates defeat or incumbent does not run for reelection)  
(See page 3 of instruction sheet)

8805.22	8805.22
5010.99	5010.99
13,816.21	13,816.21
0	0
17,299.13	123104 ending balance

## AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature [Signature]

Date 010906

REC'D BY CCED  
2006 JAN - 9 P 1:30

## CAMPAIGN CONTRIBUTIONS

Report Period: ANNUALName (print) VERIE WEBER Office (if applicable) ASSEMBLY

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100  
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
DAY PO BOX 11010 RENO, NV 89520	010505	\$1500			
VIDIAR WATER 704 W NYE #201 CARSON CITY 89703	083005	250			
NY LAND RESOURCE 704 W NYE #201 CARSON CITY 89703	083105	250			
LY CHAMBER 3720 HOWARD HUGHES LV, NV 89109	100605	1000			
NACDS 1560 E SOUTHLAKE #230 SOUTHLAKE, TX 76092	101105	500			
NY POWER 6226 W SAMARA AVE LV, NV 89146	122205 102905	500 500			
SUNRISE HEALTHCARE 3186 SMARYLAND PKWY LV, NV 89109	111605	500			
HEBIC PAC 6501 W JOHN CABOT GLENDALE, AZ 85308	111705	500			
BANK OF AMERICA 800 5TH AVE - 33RD FL SEATTLE, WA 98104	110705	500			
MURJA 1415 L ST #1150 SACRAMENTO, CA 95814	120905	750			
STATIONS CASINO PO BOX 29525 LV, NV 89126	121205	1000			
B+E AUTO AUCTION 1339 N BOULDER HWY HENDERSON, NV 89015	113805	1800			
ST LINCOLN PAC 3435 CLIFF SHADOWS LV, NV 89129	112205	3000			
KRBR JT 3800 HOWARD HUGHES LV, NV 89109	122205	1000			
CARET 2515 GREEN VISTA #304 SPARKS, NV 89431	112205	3000			

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Report period ☒ Annual

5

District (if applicable)

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## CAMPAIGN EXPENSES

Report Period # ANNUALName (print) VALERIE WEBER Office (if applicable) ASSEMBLY District (if applicable) 5

## Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

**\*\* NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.**

## CAMPAIGN EXPENSES

Report Period

# ANNUAL

VALERIE WEBER

ASSEMBLY

5

Name (print)

Office (if applicable)

District (if applicable)

## Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
WOMEN'S RESOURCE MED CENTER 2915 W CHARLESTON AVE LV, NV 89102	H	011005	\$350.00
WV REPUBLICAN PARTY	H	011505	115.00
VALERIE WEBER 10001 HARPOON CIRCLE LV, NV 89117	A	011905	178.40
RAVISON FLASH 2290 CORPORATE CR HENDERSON, NV #250 89074	A	012205	150.00
VALERIE E WEBER (AS ABOVE)	A	013005	172.18
PIER ONE IMPORTS BOCA CENTER 2945 W CHARLESTON LV, NV 89117	A	020205	199.78
LCB 401 S CARSON ST CARSON CITY, NV 89701	A	020805	240.00
VALERIE WEBER (AS ABOVE)	J	030105	270.60
VALERIE WEBER (AS ABOVE)	J	030105	270.60
MY HOPE CHEST 3395 S JONES #298 LAS VEGAS, NV 89146	A	030905	193.38
CLARK CO REP PARTY 574 S DECATUR LV, NV 89107	A	030805	150.00
VALERIE WEBER 10001 HARPOON CR LV, NV 89117	F	031405	150.00

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# CAMPAIGN EXPENSES

ANNUAL

VALERIE WEBER ASSEMBLY 5  
Name (print) Office (if applicable) District (if applicable)

Expenses in Excess of \$100  
Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY	DATE	AMT
LOWDEN VETERAN CENTER 3333 CAMBRIDGE ST LV, NV 89109	H	031605	\$101.50
VALERIE WEBER 10001 HARPOON CR LV, NV 89117	J	032805	270.60
VALERIE WEBER (AS ABOVE)	J	042905	305.59
CHIEFS FOR KIDS, INC 40 UNIV OF NEVADA COOPERATIVE EXTENSION	H	050305	150.50
COUNSEL OF STATE GAYS PO BOX 17910 LEXINGTON, KY 40578	C	050905	250.50
VALERIE WEBER (AS ABOVE)	A	062705	109.12
CSA-WEST	C	070805	350.50
NCSL PO BOX 17972 DENVER, CO 80217	C	071205	425.50
SLCVB/NCSL PO BOX 17972 DENVER, CO 80217	C	071205	190.50
LCB 401 S CARSON ST CARSON CITY, NV 89701	C	071305	296.40
VALERIE WEBER 10001 HARPOON CR LV, NV 89117	A	071905	171.88
DIANA STEPHENS 2231 S MONTE CARLO LV, NV 89117	E	081005	150.50

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# Campaign expenses

X ☒ Annual

NAME (print) VALERIE WEBER Office (if applicable) Assembly District (if applicable) 5

## Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	Category	DATE	Amount
VALERIE WEBER 15501 HARPOON CR LV, NV 89117	C	081905	329.72
VALERIE WEBER (as above)	C	082305	126.50
VALERIE WEBER (as above)	A	090105	206.79
VALERIE WEBER (as above)	C	100305	178.23
VALERIE WEBER (as above)	A	100305	248.07
VALERIE WEBER (as above)	J	101005	310.33
OFFICE MAX 8720 W CHARLESTON LV, NV 89117	A	101305	121.73
STRATEGUM GROUP 5120 HICKORY OAK ORLANDO, FL 32817	F	101305	500.00
VALERIE WEBER (as above)	A	103105	343.79
VALERIE WEBER (as above)	A	111905	291.84
SEES CANDY 3911 SPRING MTN RD LV, NV 89102	B	121705	106.25
VALERIE WEBER 15501 HARPOON CR LV, NV 89117	C	121705	601.60

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**Expenses in Excess of \$100**  
**Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary**

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## IN KIND CONTRIBUTIONS AND EXPENSES REPORT

**IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.**

*In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.*

**The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)**

**Examples of in kind contributions:** (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.

**Example of in kind expenses:** (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.

# Annual

District (if applicable)

Report Period	# Annual
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**In Kind Written Commitments in Excess of \$100 or, When Added Together from One Entity Exceeds \$100  
Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary**

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**IN KIND CAMPAIGN  
EXPENSES**

Report Period # Annual

Name (print) VALERIE WEBER

Office (if applicable) ASSEMBLY

District (if applicable) 5

**IN KIND**

Expenses in Excess of \$100

Transfer Total Value of All In-Kind Campaign Expenses to Line 11 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
	<u>None</u>		

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Prescribed by Secretary of State  
NRS 294A.120, 294A.125,  
294A.140, 294A.150, 294A.160  
294A.200, 294A.210, 294A.220, 294A.362